STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145947	A. Building B. Wing	06/17/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Aperion Care Midlothian	3249 West 147th Street Midlothian, IL 60445

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0600 Level of Harm - Actual harm Residents Affected - Few Note: The nursing home is disputing this citation.	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview and record review, the facility failed to protect a resident's right to be free from physical abuse by a staff member. This failure affected one (R1) of three residents reviewed for abuse. R1 sustained redness and bruising on his left eye after he was hit by staff while providing care.Findings include:R1 is 77 years and have resided at the facility since 2023, face sheet listed the following past medical history: Benign neoplasm of cerebral meninges, chronic embolism and thrombosis of left popliteal vein, atherosclerotic heart disease of native coronary artery without angina pectoris, other seizures, hypertensive heart disease without heart failure, major depressive disorder, dementia in other diseases classified elsewhere, unspecified severity without behavioral disturbance, psychotic disturbance, mood disturbance and anxiety, Alzheimer's disease unspecified, essential primary hypertension, etc.Review of R1's quarterly Minimum Data Set (MDS) dated [DATE] revealed under section C - cognitive patterns R1 has a brief interview for mental status (BIMS) score of 3 indicating memory problem, section GG-functional status indicates R1 requires supervision/touching assistance from staff for eating but dependent on staff for all other activities of daily living (ADL) needs. R1's face sheet however indicated that R1 is responsible for himself and makes his own decisions.On 6/16/2025 at 9:50AM, R1 was in bed, awake and alert with some confusion, and stated he is doing okay. surveyor noted dark purplish bruising around resident's left eye and asked him what happened to his eye. R1 said, Staff hit me. Surveyor asked resident how and when the incident happened. R1 said yesterday in the hallway, resident could not give details of what he was doing in the hallway before the incident or what happened after. On 6/17/2026 between10:30AM and 12:35PM, R5 and R6 (R1's roommates) stated that they were in the room the day R1 had an altercation with V4. R5 stated that he could not see through the privacy curtain, but he heard an argument and what sounded like someone was being struck. R6 said that he observed V4 hit R1 with a shampoo bottle in his arm and leg.Facility reported incidents dated 6/12/2026 documented in part: On 6/12/2026, R1 reported that that he felt the care provided to him this morning shift was inconsistent with the facility standards, R1 stated that staff bumped him during Activities of Daily Living (ADL) care. R1 was assured of his safety, CNA was suspended, nursing staff performed a skin check on R1 with superficial scratch under left eye noted, MD was notified, responsible parties notified, village police notified.Police report dated 6/12/2026 documented in part: To facility for a battery complaint. Upon arrival, I met with V1 the Administrator who relayed that at approximately 1130 hours on today' s date, an employee and a patient were in a physical altercation. V1 relayed that the individuals involved were V4 (the employee) and R1 (patient). V1 relayed that V4 said that R1 was grabbing her by the shirt refusing to let go because he did not know who she was. V1 relayed that V4 said that she was getting worried that R1 was going to hit her, so she struck him to get him to release his grip from her shirt. Prior to my arrival, V1 sent V4 home for the day. V1 also relayed that R1 has a history of being combative with staff during his time at the facility. I spoke with R1 who relayed not verbatim, that he was lying in bed when V4 entered the room and stated that the hospital is not fair. R1 relayed that he told V4 that he would hit her. When I asked R1 why he would say that R1 relayed (continued on next page)

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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F 0600 Level of Harm - Actual harm Residents Affected - Few Note: The nursing home is disputing this citation.	that he did not remember. R1 relayed that he believed V4 struck him in the left eye approximately 4 times. R1 relayed that he usually does not contact police and does not want to press charges against V4.Care plan initiated 9/27/2023 documented in part: I have potential to be physically aggressive towards staff during care related to poor impulse control. Interventions include assess and address contributing sensory deficits, explain to the resident the importance of care to assist in eliminating. If the resident refuses, allow it at the time and try again within the next hour. Get more familiar staff to assist.Fire department report dated 6/12/2026 documented in part: Unit 2732 was dispatched to facility for reported assault, Chief Complaint: Assault. [AGE] year-old male with a medical history of hypertension, seizures, and Parkinson's disease, and no known allergies, was involved in an incident of suspected abuse at a nursing home. The patient reports being assaulted, with the event occurring at approximately 12:10 on June 12, 2026, and lasting for about.10 minutes. The mechanism of injury is described as blunt trauma. Patients report no pain, with a pain scale of 0, primary impression is an eye injury.On 6/17/2026 at 9:29AM, V10 (Police officer) said that he responded to a call for battery, thought a resident made the call, but it was one of the employees that called. V10 interviewed the resident (R1) and witnesses, R1 showed signs of bruising on his left eye. V10 asked R1 what happened, and he said that he was lying in bed when staff (V4) entered the room, staff said that the hospital is not fair, R1 told staff that he would hit her, staff in turn hit R1. V10 asked R1 how many times staff hit him, and he said about 4 times. V10 spoke to V1 who said that R1 has a history of being combative, the facility has a policy of sending involved staff in an abuse case home immediately. V10 spoke to two other residents, the one close to R1 said that he could not see anything through the privacy curtain, he heard arguments and could hear someone being hit with punches. Fellow officer spoke to another resident in the room who said that he saw R1 hitting staff, then staff grabbed something and hit R1 with the object in his arms and legs, the resident could not see much because staff was standing between him and R1. V10 also spoke to V4 over the phone and she said that she entered R1's room and announced herself, told R1 that she was going to be his CNA, V4 saw R1's leg hanging out of the bed and went to help him, R1 hit her and she told him not to do it again. V4 went to help R1 again and he grabbed her shirt, V4 tried to free herself and ran out of the room, never admitted to hitting R1. V10 said that R1 did not want to press charges and refused to be transported to the hospital. V10 added that paramedics gave R1 an ice pack, R1's left eye was red and discolored but not necessarily swollen. The incident happened between 11:30AM and 12:00PM. V10 returned to the facility around 5:15PM and took pictures of R1's eye which has some bruising at this point.On 6/17/2026 at 2:17PM V11 (Firefighter/Paramedics) said that on 6/12/2026 they received a call for an injured person, upon arrival at the facility, they realized that it was a confrontation between one of the residents and a staff. The resident stated that the staff (CNA) struck him multiple times in the face area, resident was assessed, his vital signs were okay, resident refused transportation to the hospital, he sustained a slight bruising and discoloration. V11 described the injury as 3 out of 10 bruises but stated that it was consistent with someone being hit in the face area. R1 denied any pain but was mostly emotionally distressed, maybe from calling 911. V11 did not speak to other residents in the room but stated that the police officer spoke to the roommates and from what V11 overheard, their account of the event was consistent with what R1 reported, that he was struck by the staff.On 6/16/2026 at 12:52PM, V7 (Attending physician) said that he was notified of the incident, facility called him and said that there was a physical altercation, R1 was struck by a CNA, R1 sustained a minor scratch, there was no loss of consciousness, V7 did not order anything just routine neuro checks.On 6/16/2026 at 11:05AM, V4 certified nurse assistant (CNA) said that she went into R1's room to address him and let him know that she is his CNA, and resident told her that he doesn't know her and told her to get out of the room. V4 noticed resident's leg hanging out of the bed and wanted to help him, but he kicked her. V4 then went to get the remote control from resident's bed, and he grabbed her shirt and was screaming obscenities at her. V4 said he grabbed resident's hands, broke free and ran out of the room to tell the nurse who told her that she would swap resident with (continued on next page)

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